



Provider Communication

Subject: Presumptive Eligibility/New Forms	Priority: High
Date: June 16, 2005	Message ID: ACSBNR06162005_1

Dear Provider,

Beginning July 1, 2005, the Medicaid application, used in the Presumptive Eligibility Program, will change. Currently in use is the red and white Right From the Start Medicaid (RSM) application. A multi-purpose Medicaid application, Form 94, available in both English and Spanish, replaces this document.

To obtain the new Form 94, access the Department of Human Resources' (DHR) website at **www.odis.dhr.state.ga.us**. Once inside the site, click **Index**. Then, scroll down to **Family and Children** and enter. Access **Medicaid and MAN3480**. From this site, scroll down to **Appendix F (Forms)**. Both English and Spanish versions of the Form 94 are there.

Your offices must make and keep copies on hand. Our Department no longer offers or orders the red and white RSM applications. The new documents and instructions for completion are in the revised Presumptive Eligibility manual, scheduled for publication on July 1, 2005.

To aid in educating pregnant women about Medicaid and the application process, complete and give the woman the **"Quick Guide for Pregnant Women's Program"**. This document and instructions for completion are in the July revision of the Presumptive Eligibility manual. This form should be downloaded from the manual. We request that providers make and keep copies on hand.

All other documents, such as, forms DMA-632 (application), DMA-632A (citizenship affidavit), DMA-634 (Notice of Action), and DMA-285 (Health Insurance Questionnaire) still are in use. With the exception of the citizenship affidavit (DMA-632A), order these forms from our fiscal agent, Affiliated Computer Services (ACS), by calling (404) 298-1228, 1-800-766-4456, (770) 570-3373, or 1-866-211-0950. The citizenship affidavit should be obtained from the Presumptive Eligibility manual and photocopied.

For additional information, contact Theresa Johnson, Medicaid Program Consultant, at (404) 657-7263. Thank you for your interest and participation in the Medicaid program.

Sincerely,

Department of Community Health